Substitut	Substitute for form 1449/PTO			Complete if Known		
INFORMATION DISCLOSURE				Application Number	10/767,249	
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STATEMENT			First Named Inventor	Stuel pnagel et al.		
BY APPLICANT				Art Unit	1637	
DI ALI LIGARI		••	Examiner Name	Baug hman, Molly E.		
Sheet	1	of	11	Attorney Docket Number	01-00000	

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Examiner	Date	
Signature	Considered	1 1

*EXAMINER Invited reference considered, whether or not classes in in conformance with MPEP 609. Draw line through classes if not in conformance and not considered, include copy of this form with next communication to applicant.

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